Department for Environmental Protection Kentucky Division of Water

A Guide to Completing the KYG04 eNOI Application for KPDES Coverage Under

Coal General Permits KYGE4 and KYGW4

October 2014



To Protect and Enhance Kentucky's Environment



Goals

- Familiarize users with the KYG04 eNOI:
 - System requirements
 - Information you will need to complete the eNOI
 - Creating and saving eNOI forms
 - Navigating the eNOI and entering information
 - Submitting the eNOI and ePay
 - Responding to NODs





System Requirements

- Required browser versions:
 - Internet Explorer 10+, Firefox 26+, and Chrome 34+.
- Firefox and Chrome are the recommended browsers.
- This website requires Adobe Flash.





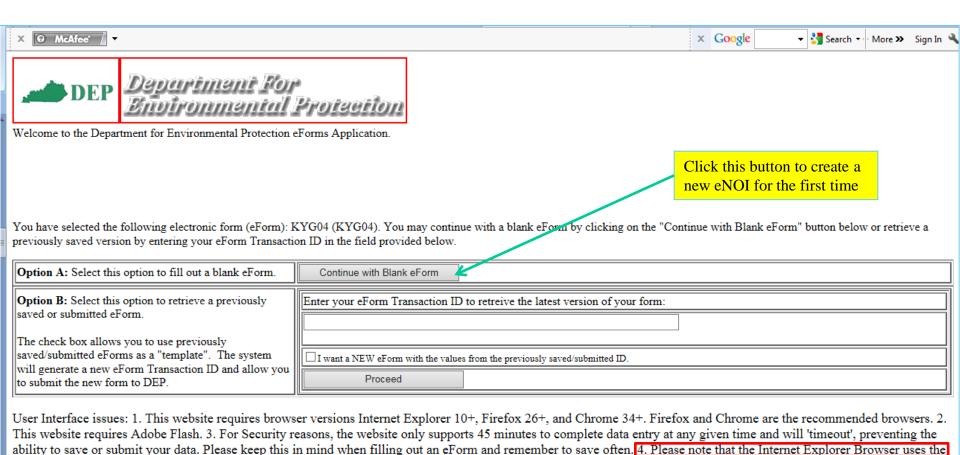
Links for Identifying Excluded Operations See "Helpful Links for Coal GP" Handout

- Check to make sure your discharges are not excluded from GP coverage due to:
 - Impaired water with TMDL
 - -CAH
 - -OSRW with T&E Species
 - -ONRW
 - Water Supply Intake Locations





Creating & Saving eNOI Forms Creating a Blank eForm



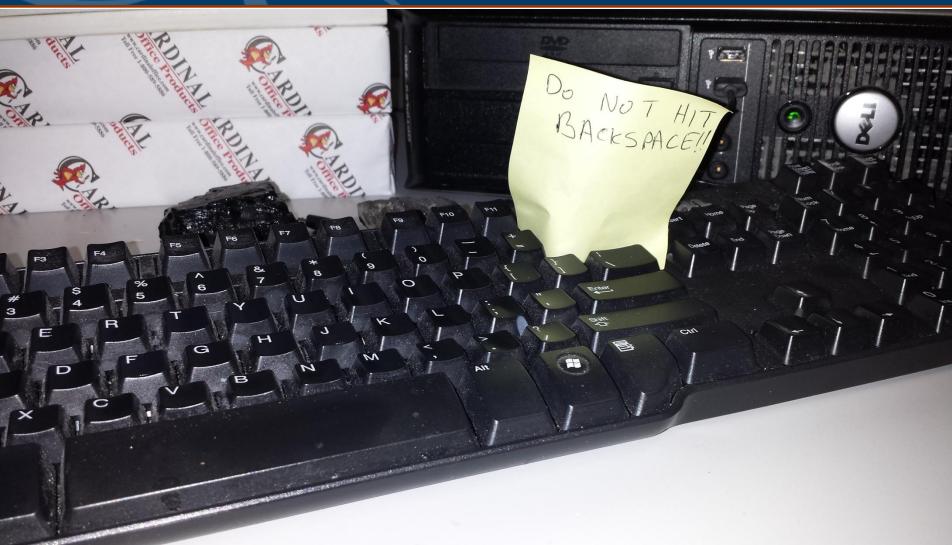
Backspace key as a Hot-Key for the Back button (Previous Page). When selecting values from a Dropdown List, using the backspace key will take you to the previous page



and you will need to reenter your information.



Creating & Saving eNOI Forms DO NOT HIT BACKSPACE!







Creating & Saving eNOI Forms SAVE OFTEN!

SAVE OFTEN!

- The eForm website will 'timeout' and lose its connection if you are not actively entering information.
- If you expect to be inactive for 15 minutes of more, go down to the bottom of the form and "Click to Save Values for Future Retrieval".
- Be sure to record the transaction ID, so you can log back in and continue where you left off.





Creating & Saving eNOI Forms How to Save

SECTION XI – CERTIFICATION						
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.						
Signature:(*) Signature				Title:(*) Title		
First Name:(*) First Name		M.I.:		Last Name: (*) Last Name		
eMail Address:(*) eMail Address	Business Phone	one:(*)		Alternate Phone: Phone	Signature Date:(*) Date	
Click to Save Values for Future Retrieval Click to Con	itinue to ePay	Pay ar	n	d Submit		

To **SAVE**, go to the bottom of the form and "Click to Save Values for Future Retrieval"





Creating & Saving eNOI Forms Timing Out

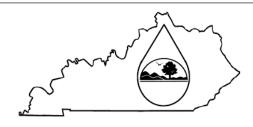


This is what you will see if your session times out.





Navigating the eNOI and Entering Information What You See When You Open the eNOI



KENTUCKY POLLUTION DISCHARGE

ELIMINATION SYSTEM (KPDES)

Notice of Intent (NOI) for coverage of Coal Mining, Processing and Associated Activities in Kentucky Under the KPDES General Permit KYGE40000 and KYGW40000

Click here for Instructions

(*) indicates a required field; (✓) indicates a field may be required based on user input or is an optionally required field

Reason for Submittal:(*)	Agency Interest ID:	KPDES Permit ID:(✓)
V	Agency Interest ID	KPDES Permit ID
Describe the activities associated with this coverage being sought:(*)		

ELIGIBILITY:

Only those coal mining and/or processing operations meeting the following requirements are eligible for coverage under KYGE40000 (KYGE4) and KYGW40000 (KYGW4):

- 1) Are within the physical and political boundaries of the Commonwealth of Kentucky, and
- Have obtained a Surface Mining Control and Reclamation Act (SMCRA) permit from The Department for Natural Resources (DNR) or are in the process of obtaining a SMCRA
 permit, and
- 3) Do not have continuous discharges (for KYGW4 only)

For the purposes of KYGW4, continuous discharge is defined as a discharge that occurs without interruption or has an average discharge duration of 96 hours or more.

EXCLUSIONS

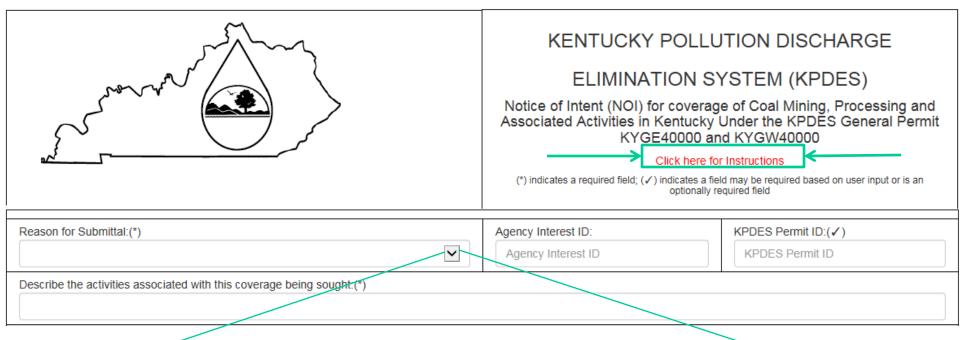
The following are excluded from coverage under this general permit:

- Coal mining and/or processing operations that directly discharge to or propose to directly discharge to a receiving water body that has been categorized as an "Impaired Water" for
 a pollutant or pollutants of concern that may be associated with such activities and for which an approved Total Maximum Daily Load (TMDL) has been developed;
- 2) Coal mining and/or processing operations that directly discharge to or propose to directly discharge to a receiving water body that has been designated as Coldwater Aquatic Habitat (CAH) as listed in Table C of 401 KAR 10:030. Section 5:
- 3) Coal mining and/or processing operations that directly discharge to or propose to directly discharge to a receiving water body that has been designated as an Outstanding State Resource Water (OSRW) due to its support of a federally listed Threatened or Endangered Species as listed in Table C of 401 KAR 10:030, Section 5;
- 4) Coal mining and/or processing operations that directly discharge to or propose to directly discharge to a receiving water body that has been classified as an Outstanding National Resource Water (ONRW) as listed in 401 KAR 10:030, Section 1;
- 5) New or expanded coal mining and/or processing operations that propose to discharge within five (5) miles upstream of any existing domestic water supply intake listed in 401 KAR 10:026. Section 5(2(b) Table B: or
- 6) Coal mining and processing activities that Division of Water (DOW) has determined would be more appropriately addressed by an individual permit or an alternate general permit.





Navigating the eNOI and Entering Information Reason for Submittal

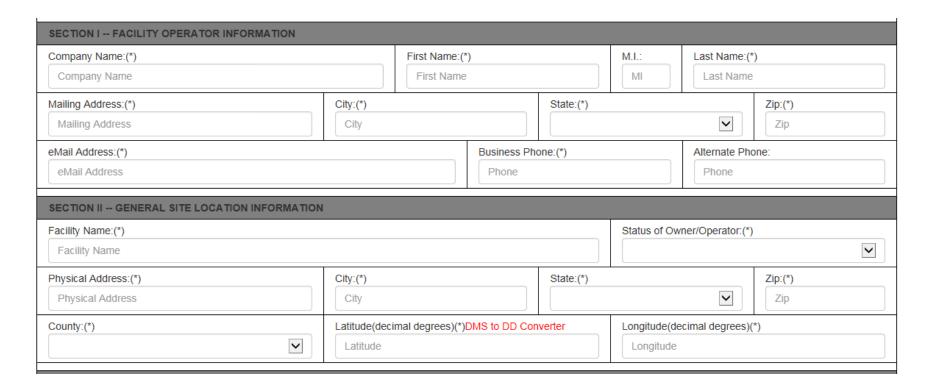


Application for New Permit Coverage
Change to Existing Permit Coverage
Previously Covered by an Individual Permit
Renewal of Existing Permit Coverage
Response to Notice of Deficiency





Navigating the eNOI and Entering Information Sections I and II



- Section I must contain **permittee** (not consultant) information.
- Latitudes and longitudes are in decimal degrees with **5 digits** after the decimal.



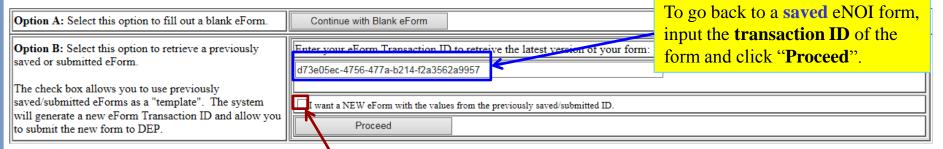


Creating & Saving eNOI Forms Retrieving a Saved Form; Creating a Template



Welcome to the Department for Environmental Protection eForms Application.

You have selected the following electronic form (eForm): KYG04 (KYG04). You may continue with a blank eForm by clicking on the "Continue with Blank eForm" button below or retrieve a previously saved version by entering your eForm Transaction ID in the field provided below.



User Interface issues: 1. This website requires browser versions Internet Explorer 10+, Firefox 26+, and Chrome 34+. Firefox and Chrome are the recommended browsers. 2. This website requires Adobe Flash. 3. For Security reasons, the website only supports 45 minutes to complete data entry at any given time and will 'timeout', preventing the ability to save or submit your data. Please keep this in mind when filling out an eForm and remember to save often. 4. Please note that the Internet Explorer Browser uses the Backspace key as a Hot-Key for the Back button (Previous Page). When selecting values from a Dropdown List, using the backspace key will take you to the previous page and you will need to reenter your information.

You can use a previous eNOI as a **template** by entering the transaction ID and checking **this box** before selecting "**Proceed**". This creates a new eNOI form with the information from the existing eNOI.

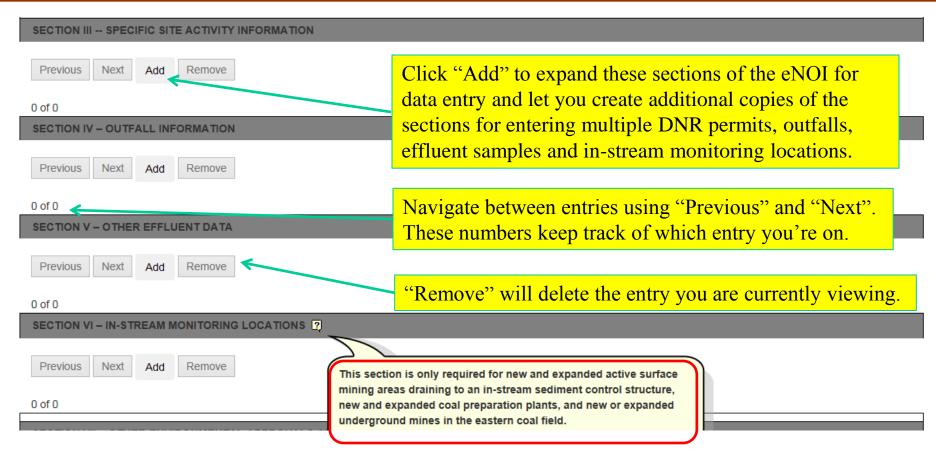
x Google

▼ 🋂 Search 🕶 More ≫ Sign In 🌂





Navigating the eNOI and Entering Information Adding Sections III, IV, V, VI







Navigating the eNOI and Entering Information Section III – Specific Site Activity Information

SECTION III SPECIFIC SITE AC	CTIVITY INFORMATION						
Type of Operation:(*)			SMCRA Permit Number:(*)			DNR Action(s):(*) DNR Action(s)	
		ACRE	AGE(*)				
Activity	Current	Additions	Deletions	Re-desi	gnation	Total(*)	
Coal Preparation Plant and Associated Areas							
Active Surface Mining Areas							
Reclamation Areas							
Underground Workings							
Auger/Highwall							
Other Areas							
Describe other areas: Describe other areas New facility or new acreage proposed for coverage							
		Hollow Fil	l Inventory				
Number of Hollow Fills(*) Required Field Please enter the number of Hollow Fills. Previously permitted by KPDES Previously permitted by KPDES							

Previous Next Add Remove

Select "Add" to include information for more SMCRA permits.



1 of 1



Navigating the eNOI and Entering Information Section III – Specific Site Activity Information

Hollow Fill Inventory						
Number of Hollow Fills(*) The HF section is created	when					
you put a number in this b	OOX					
Please enter the number of Hollow Fills.						
HF ID Number:(*)	Status:(*)	Existing Proposed				
Identifier		Expanded				
Current HF size (acres):(*)	proposed HF size	e (acres):(*)				
# of acers	# of acers					
KPDES Outfall Number(s):(*)						
HF ID Number:(*)	Status:(*)					
Identifier		Y				
Current HF size (acres):(*)	proposed HF size	e (acres):(*)				
# of acers	# of acers					
The outfall or outfalls that receive drainage from the HF						

Existing = previously permitted under KPDES

Proposed = new or not previously permitted under KPDES





SECTION IV – OUTFALL INFORMATION						
KPDES Outfall Number:(*)	SMCRA Permit Number:(*) SMCRA ID		DNR Pond Number:(*) Pond Number			
Status:(*)	If outfall is shared, enter SMC Pond No.:	CRA Permit No. and DNR	Type of Outfall:(✓)			
Latitude(decimal degrees):(*)DMS to DD Converter Latitude		Longitude(decimal degrees) Longitude	:(*)			
Current Drainage area (acres):(*)		Proposed expanded drainag				
Type of Drainage Received:(*)	Additional Type of Drainage I	Received:	Additional Type of Drainage Received:			
If sanitary discharge is selected, is treated sanitary wastewat	ters discharged to:(✓)		V			
Does outfall enter an unnamed tributary prior to entering a na	amed receiving water?:(✓)	Receiving W Receiving	Vater(✓)(click here for a list) ② Water			
Current or proposed treatment:(*)	If treatment is	s Sedimentation & Other is sele	ected, describe treatment:(✓)			
List all chemicals used in processing, and for treatment:						
Does outfall have an average discharge duration of 96 hou	ırs or more?:(*)		✓			

Outfall information requirements – see next pages for dropdowns.



Navigating the eNOI and Entering Information Outfall Information

KPDES Outfall Number:(*)	SMCRA Permit Number:(*) SMCRA ID	DNR Pond Number:(*) Pond Number
Expanded Existing Deleted from Plan	If outfall is shared, enter SMCRA Permit No. and DNR Pond No.: Longitude(decimal degrees):	Type of Outfall:(✓)
Outfall Removed Proposed	Longitude	
Current Drainage area (acres):(*)	Proposed expanded drainage Proposed expanded draina	

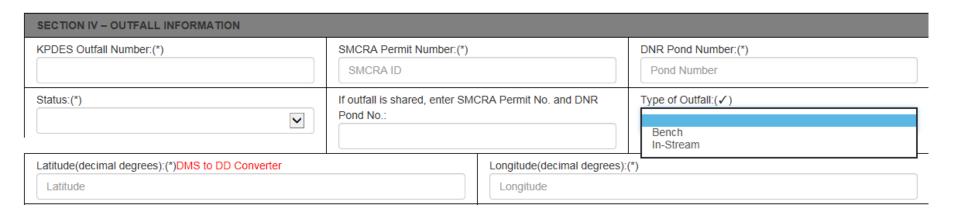
Expanded = acreage added to drainage area

Existing = previously permitted under KPDES

Proposed = new or not previously permitted under KPDES







Type of Outfall only required for Eastern KY

Bench

- Does not meet the definition of In-Stream.

In-Stream

- Constructed within the natural drainage way of a water body,
- Have a continuous discharge, or
- Have an average discharge duration of 96 hours or more.





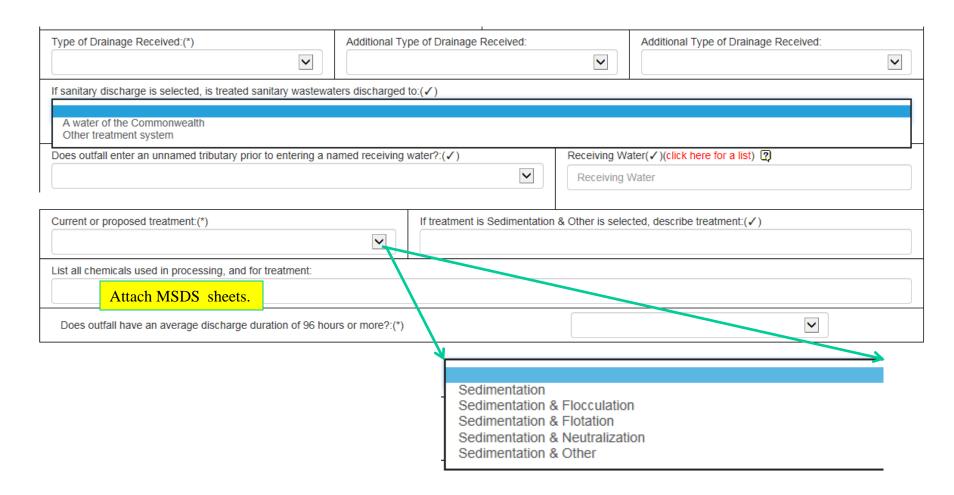
Lamado			Longitudo			
Current Drainage area (acres):(*)				oanded drainage expanded draina	e area (acres):(*) age area	
Type of Drainage Received:(*) CSMD NSMD		Additional Type of Drainage Received: Additional Type of Drainage Received:				
PPA RA SANITARY SSMR		(- /				~
UGNC	named receiving wa	iter?:(✓)	V	Receiving Wa	ater(✓)(click here for a list) <a>② Water	
Current or proposed treatment:(*)	Y	If treatment is	Sedimentation	& Other is sele	cted, describe treatment:(✓)	
List all chemicals used in processing, and for treatment:						
Does outfall have an average discharge duration of 96 h	ours or more?:(*)				V	

See instructions for description of drainage types.

Up to three types of drainage can be entered for each outfall.











**SUBSTANTIALLY IDENTICAL / REPRESENTATIVE OUTFALLS (RO)						
For the purposes of RPA for this application: Is this outfall used as a RO?:(*)	Are you submitting a sample from this outfall?(✓)					
If RO, list associated outfalls:(✓)						
If this outfall is being represented by another outfall for RPA, provide the outfall number of the	at RO:					

Substantially Identical/Representative Outfalls (RO and CRO)

- -Outfalls that receive drainage from the same type of mining activities, disturb the same overburden, utilize the same type of sediment control structures, are within the same **HUC 14 watershed**, are expected to produce chemically similar effluents and would be subject to the same effluent limitations.
- -A justification statement is required when requesting Representative Outfalls. See eNOI Instructions for justification requirements.





Dellutent ex Bellutt	1	EFFLUENT DATA TABLE (✓)					
Pollutant or Pollutant Characteristic	Results	RRL	Pollutant or Pollutant Characteristic	Results	RRL		
Flow:	MGD		Total Recoverable Chromium	µg/I			
Total Suspended Solids:	mg/l		Total Recoverable Copper:	hā/l			
pH:	S U		Total Recoverable Lead:	µg/l			
Hardness (as CaCO3):	mg/l		Total Recoverable Mercury:	μg/l	Note that these		
Sulfate (as SO4):	mg/l		Total Recoverable Nickel:	µg/l	should require		
Specific Conductance:	μS/cm		Total Recoverable Selenium:	µg/I	(Minimum Rej		
Total Recoverable Iron:	mg/I		Total Recoverable Silver:	рд/І	Limit). The eN		
Total Recoverable Manganese:	mg/l		Total Recoverable Thallium:	µg/I	be updated to on this error. Please		
Total Recoverable Antimony:	µg/l		Total Recoverable Zinc:	µg/I	the MRL, not		
Total Recoverable Arsenic:	µg/l		Free Cyanide:	µg/l			
Total Recoverable Beryllium:	µg/l		Total Phenols:	µg/l			
Total Recoverable Cadmium:	µg/l						
For the purposes of permit c	ompliance: Is this outfall used a		If CRO, list associated outfalls:(′)			
		V					
If this outfall is being represe	ented by another CRO, provide t	he outfall number of that CRO:					





Navigating the eNOI and Entering Information Section V – Other Effluent Data

SECTION V OTHER EFFLUENT DATA						
To provide a sample for RPA when there are no existing discharges on the proposed activity, the permittee may use data from an adjacent existing activity which is substantially identical. If there are no existing discharges or substantially identical adjacent activities, then the permittee shall estimate the expected discharge levels. If submitting a substantially identical RO sample from an adjacent existing activity or an estimated effluent sample, complete this section.						
Are you submitting data from an adjacent existing activity which is substantially identical?(*)						
KPDES Outfall No.:(✓)	SMCRA Permit Number and	DNR Pond Number:(✓)	Date Sample Taken:(✓)			
Identifier	ID(s)					
Is the outfall located in an unnamed tributary of a named rece	eiving water?:(✓)	Receiving Water(✓)(click	here for a list) 2			
	~	Receiving Water				
Latitude(decimal degrees)(✓)DMS to DD Converter		Longitude(decimal degree	98)(✓)			
Latitude		Longitude				
If RO, list associated outfalls:						
List of associated outfalls						
Are you submitting an estimate of the expected discharge le	evels?(*)			V		
If estimated, list associated outfalls:(✓)						
	EFFLUENT DA	TA TABLE (✓)				
Note: New operation	ons must submit a	ctual discharge	data to	BU.		

DOW for RPA within two (2) years of commencing discharge.

V



Navigating the eNOI and Entering Information **Section VI – In-Stream Monitoring Locations**

SECTION VI – IN-STREAM MONITORING LOCATIONS –	Eastern KY Only				
In-Stream Monitoring Identifier:(✓) Identifier	Latitude(decimal degrees)(✓)DMS to DD Converter Latitude		Longitude(decimal degrees)(✓) Longitude		
Is the in-stream monitoring point located in an unnamed tributary prior to entering a named receiving water?:(✓)	Stream Name () (click here	e for a list) 2	Associated KPDES Outfalls: Associated Outfalls		
	BACKGROUND	WATER QUALITY			
Pollutant or Pollutant Characteristic	Results	Pollutant or Pollutant	Characteristic	Results	
Flow:	MGD	Turbidity:		NTU	
Total Suspended Solids:	mg/l	Alkalinity (as CaCO3):		mg/I	
Total Recoverable Iron:	mg/l	Dissolved Oxygen:		mg/I	
pH:	SU	Temperature:		°F	
Specific Conductivity:	µS/cm	Total Hardness (as CaCO3):		mg/I	
Total Sulfate (as SO4):	mg/l	Biological Index Score:			
Total Recoverable Selenium:	µg/l				
Previous Next Add Remove	Eastern KY Only	/			



This section is only required for new and expanded active surface mining areas draining to an in-stream sediment control structure, new and expanded coal preparation plants, and new or expanded underground mines in the eastern coal field.



Navigating the eNOI and Entering Information Sections VII, VIII, IX

SECTION VII – OTHER ENVIRONMENTAL APPROVALS AND PERMIT INFORMATION						
CATEGORY	EXISTING PERMIT WITH N	JMBER		PERMIT NEEDED WITH PLANNED APPLICATION DATE		
Clean Water Act Section 404 Permit						
Underground Injection Control UIC						
SECTION VIII - DISHARGE MONITORING REPORT (DMR) CONTACT INFORMATION						
KPDES permit holders are required to submit DMRs electron specifically identify the name and contact information of the	-	n a regular sche	edule (as defined b	y the KPDES	permit). Informa	ation in this section serves to
First Name:(*)	Middle Initial:		Last Name:(*)			
First Name	MI		Last Name			
Mailing Address:(*)	City:(*)		State:(*)			Zip:(*)
Mailing Address	City				~	Zip
eMail Address:(*)		Business Pho	one:(*)		Alternate Pho	ne:
eMail Address		Phone			Phone	
SECTION IX - NOI PREPARER INFORMATION						
First Name:(*)	Last Name:(*)		Company Nam	e:(*)		
First Name MI	Last Name		Last Name			
Mailing Address:(*)	City:(*)		State:(*)			Zip:(*)
Mailing Address	City				~	Zip
eMail Address:(*)		Business Pho	one:(*)		Alternate Pho	ne:
eMail Address		Phone			Phone	





Navigating the eNOI and Entering Information Test Submittal Prior to Adding Attachments

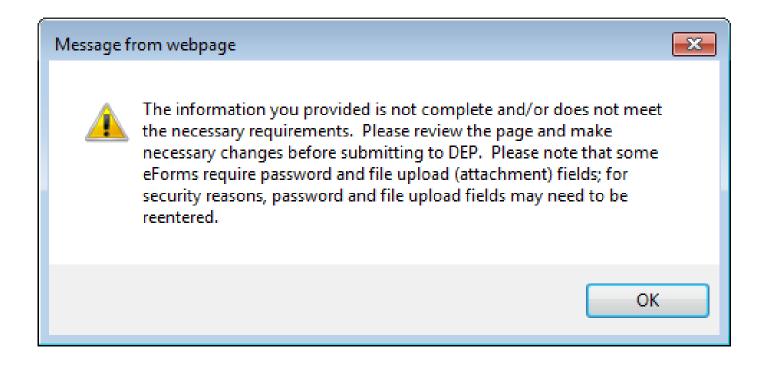
SECTION XI – CERTIFICATION			
I certify under penalty of law that this document and all attace personnel properly gather and evaluate the information subregathering the information submitted is, to the best of my kno information, including the possibility of fine and imprisonment	mitted. Based on my inquiry of the person or pe wledge and belief, true, accurate, and complet	rsons who manage the system, or those persons	s directly responsible for
Signature:(*)		Title:(*)	
Signature		Title	
First Name:(*)	M.I.:	Last Name:(*)	
First Name	MI	Last Name	
eMail Address:(*)	Business Phone:(*)	Alternate Phone:	Signature Date:(*)
eMail Address	Phone	Phone	Date
	all and the Barrier		
Click to Save Values for Future Retrieval Click to Co	ontinue to ePay		
Save! Pay	and Submit		

You can check your work for incomplete fields or wrong data formats at any time while working on the eNOI by first **Saving** and then attempting to **Pay and Submit** your eNOI.





Navigating the eNOI and Entering Information Failed Submittal



If you see this message when you try to **submit** your eNOI, you must correct or add information to the fields highlighted in red before your submittal will be accepted.





Navigating the eNOI and Entering Information Red Indicates Corrections Needed

KPDES Outfall Number:(*) Identifier is a Required Field	SMCRA Permit Number:(*) SMCRA ID SMCRA is a Required Field		DNR Pond Number:(*) Pond Number DNR Pond Number is a Required Field
Status:(*) Status is a Required Field	If outfall is shared, enter SM Pond No.:	CRA Permit No. and DNR	Type of Outfall:(✓) Type of outfall is a Required Field
Latitude (decimal degrees):(*)DMS to DD Converter Latitude Latitude is a Required Field		Longitude(decimal degrees) Longitude Longitude is a Required Fie	
Current Drainage area (acres):(*) Current drainage area is a Required Field		Proposed expanded drainag Proposed expanded drainag Proposed expanded drainag	age area
Type of Drainage Received:(*) Type of Drainage Received is a Required Field	Additional Type of Drainage	Received:	Additional Type of Drainage Received:

After you've filled out the entire form and get no more red highlights when you do a test submittal, proceed to adding the required attachments.





Navigating the eNOI and Entering Information Section X - Attachments

SECTION X - ATTACHMENTS			
Mine Reclamation Plan (MRP) Map:(*)	Upload file	Maximum of five files.	
KPDES Map:(*)	Upload file	Maximum of one file.	
Full color USGS 7½-minute quadrangle map with the facility site clearly marked:(*)	Upload file	Maximum of one file.	
Socioeconomic Demonstration and Alternatives Analysis (SDAA):	Upload file	Maximum of one file.	
Effluent Data Lab Sheets:	Upload file	Maximum of five files.	
Justification Statements:	Upload file	Maximum of one file.	
Other File(s):	Upload file	Maximum of five files.	

Attachments are **not** retained when the eNOI is **saved**, so they should be uploaded only when you are ready to **submit** the eNOI.

TIP: If you have more files to attach for a category than the number of files accepted for that category, you can attach them as other files.





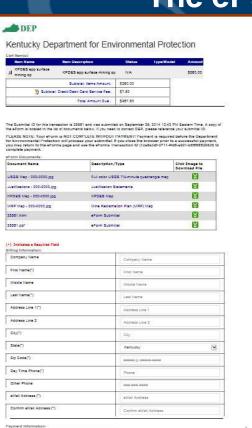
Navigating the eNOI and Entering Information Section XI - Certification

SECTION XI – CERTIFICATION			
I certify under penalty of law that this document and all attach personnel properly gather and evaluate the information subm gathering the information submitted is, to the best of my know information, including the possibility of fine and imprisonment	itted. Based on my inquiry of the person or pe vledge and belief, true, accurate, and complete	rsons who manage the system, or those persons	s directly responsible for
Signature:(*) Signature		Title:(*) Title	
First Name:(*) First Name	M.I.:	Last Name: (*) Last Name	
eMail Address:(*) eMail Address	Business Phone:(*) Phone	Alternate Phone: Phone	Signature Date:(*) Date
Click to Save Values for Future Retrieval Click to Con	ntinue to ePay		
Save! Pay a	and Submit		
Note: The signature da	ate must be undated	with each submittal	<mark> </mark>





ePay Process The ePay Form



Note: You will be charged a service fee of \$7.50 for Pay By CreditDebit Card, There is no service fee for Pay By ACH Debit (Check/Savings)

American European

Y

Card Type (*)

Name as Appears on Card(*)

Card Number() (15 digit number, no spaces or deshes)

Card CVVICIO Number(*)

Expiration(*)

You have 20 minutes to complete the ePay process before it times out. If you close your browser prior to a successful payment, you may return to the eForms page and use the transaction ID to complete payment.





ePay Process Transaction Summary and Amount Due



Kentucky Department for Environmental Protection

	Item Name	Item Description	Status	Type/Model	Amount
ı	KPDES app surface mining op	KPDES app surface mining op	N/A		\$260.00
0		Subtotal: Items Amount:	\$260.00		
	Subtotal	: Credit/Debit Card Service Fee:	\$7.80		
		Total Amount Due :	\$267.80	İ	

The Submittal ID for this transaction is 25561 and was submitted on September 25, 2014 12:43 PM Eastern Time. A copy of the eForm is located in the list of documents below. If you need to contact DEP, please reference your submittal ID.

PLEASE NOTE: Your eForm is NOT COMPLETE WITHOUT PAYMENT! Payment is required before the Department for Environmental Protection will process your submittal. If you close the browser prior to a successful payment, you may return to the eForms page and use the eForms Transaction ID (1ca8a3df-3711-4fd6-a001-b65f6652082f) to complete payment.

eForm Documents:				
Document Name	Description/Type	Click Image to Download File		
USGS Map - 000-0000.jpg	Full color USGS 7½-minute quadrangle map	8		
Justifications - 000-0000.jpg	Justification Statements	8		
KPDES Map - 000-0000.jpg	KPDES Map	8		
MRP Map - 000-0000.jpg	Mine Reclamation Plan (MRP) Map	8		
25561.html	eForm Submittal	8		
25561.pdf	eForm Submittal	8		



ePay Process Billing Information Required

(*) Indicates a Required Field

Company Name
First Name
Middle Name
Last Name
Address Line 1
Address Line 2
City
Kentucky
or #####
Phone
###
eMail Address
Confirm eMail Address





ePay Process Pay By Credit/Debit Card

Payment	Information:
---------	--------------

Pay By Credit/Debit Card	OPay By ACH Debit (Check/Savings)

Note: You will be charged a service fee of \$7.80 for Pay By Credit/Debit Card. There is no service fee for Pay By ACH Debit (Check/Savings).

Card Type:(*)	American Express	V
Name as Appears on Card(*)	Name on Card	
Card Number(*) (15 digit number; no spaces or dashes)	Card Number	
Card CVV/CID Number(*)	CVV/CID	
Expiration(*)		V
	-	<u> </u>

Pay Now! Reset





ePay Process Pay By ACH Debit (Check/Savings)

0-	0		
OPay By Credit/Debit Card	Pay By ACH Debit (Check/Savings)		
Account Type(*)		Checking	~
Name on Account(*)		Name on Account	
Routing Number(*)		Routing Number	
Account Number(*)		Account Number	
Check Number/ID		Check Number	
PAY TO THE ORDER OF		91-548/1221 \$ \$ \$	
FOR		DOLLARS	
:12210527B:	6724301068# 24	00"	
All			
Routing Number	Account Number Check	Number	





ePay Process Payment Receipt



Kentucky Department for Environmental Protection

Thank you for using the Kentucky Department for Environmental Protection ePay website. An email of this transaction will be sent to you shortly. Please print a copy of this page as your receipt for this transaction.

eForm Documents:

Document Name	Description/Type	Click Image to Download File
USGS Map - 000-0000.jpg	Full color USGS 7½-minute quadrangle map	8
Justifications - 000-0000.jpg	Justification Statements	8
KPDES Map - 000-0000.jpg	KPDES Map	8
MRP Map - 000-0000.jpg	Mine Reclamation Plan (MRP) Map	8
25561.html	eForm Submittal	8
25561.pdf	eForm Submittal	S

Payment ID: 74215

Payment Date: SEPTEMBER 25, 2014 12:51:2

Amount Paid: \$260.00

Bill Company Name: Company Name

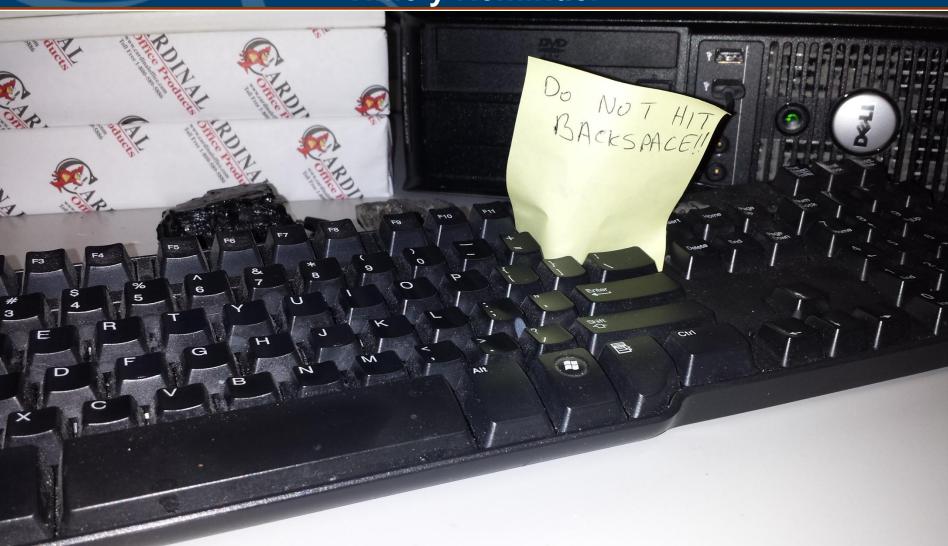
Bill Person Name: Last, First

Bill Address: Address, City, KY, 40601 Account Last 4 Numbers: 1068 Name on Account: First Last The Item ID(s) paid for: 1017





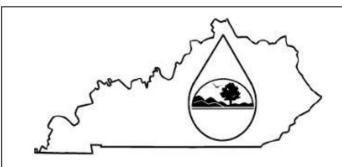
Responding to NODs Timely Reminder







Responding to NODs General Comments Section



KENTUCKY POLLUTION DISCHARGE

ELIMINATION SYSTEM (KPDES)

Notice of Intent (NOI) for coverage of Coal Mining, Processing and Associated Activities in Kentucky Under the KPDES General Permit KYGE40000 and KYGW40000

Click here for Instructions

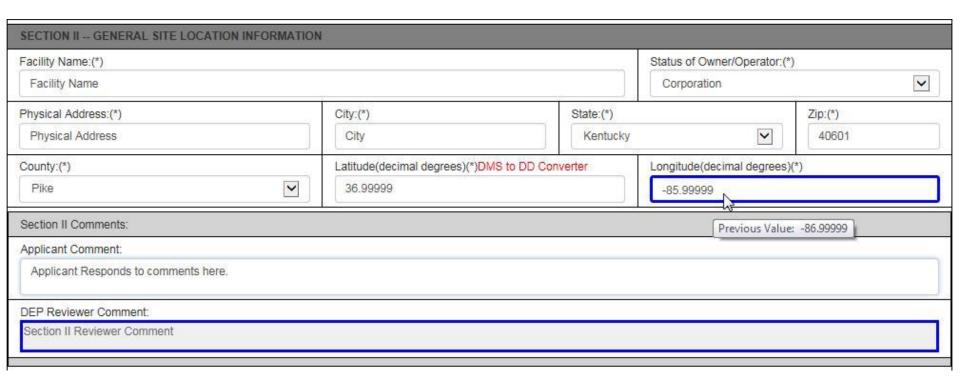
(*) indicates a required field; (✓) indicates a field may be required based on user input or is an optionally required field

General Comments:			
Applicant Comment:			
DEP Reviewer Comment:			
DEP Reviewer General Comments			
DEP Reviewer General Comments			
DEP Reviewer General Comments			
Reason for Submittal:(*)		Agency Interest ID:	KPDES Permit ID:(✓)
	<u></u> ✓	Agency Interest ID: Agency Interest ID	KPDES Permit ID:(✓) KPDES Permit ID
Reason for Submittal:(*)			





Responding to NODs Section-Specific Comments & Changes Made







Responding to NODs Certification and Updated Signature Date

SECTION XI – CERTIFICATION					
I certify under penalty of law that this document and all attachme personnel properly gather and evaluate the information submitted gathering the information submitted is, to the best of my knowled information, including the possibility of fine and imprisonment for	d. Based on my inquiry of the pers ge and belief, true, accurate, and	on or persons who manage the system, or those person	ns directly responsible for		
Signature:(*)		Title:(*)			
Signature		President	President		
First Name:(*)	M.I.:	Last Name:(*)			
First	M	Last			
eMail Address:(*)	usiness Phone:(*)	Alternate Phone:	Signature Date:(*)		
email@email.com	555-555-5555	Phone	9/25/2014		
Section XI Comments:					
Applicant Comment:					
Applicants Response Update Signature Date for every NOD submittal.					
DEP Reviewer Comment:			-		
Section XI Reviewer Comment					
Click to Save Values for Future Retrieval Click to Submit	to DEP				



Do not resubmit attachments unless they are part of your NOD response.



Questions?

